

APPLICATION DATA SHEET

Application Information

Application Number::
Filing Date::
Application Type:: Regular
Subject Matter:: Utility
Title:: Method and Apparatus for Treating
Wrinkles in Skin Using Radiation
Attorney Docket Number:: CDL-026C3
Total Drawing Sheets:: 2
Small Entity?::
Licensed US Govt. Agency:: No
Contract or Grant Numbers:: N00014-94-1-0927
Secrecy Order in Parent Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: R.
Middle Name:: Rox
Family Name:: Anderson
Name Suffix::
City of Residence:: Lexington
State or Province of Residence:: MA
Country of Residence:: US
Street of Mailing Address:: 399 Marrett Road
City of Mailing Address:: Lexington
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 02421

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Edward
Middle Name:: Victor
Family Name:: Ross
Name Suffix:: Jr.
City of Residence:: San Diego
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 2527 Bancroft Street
City of Mailing Address:: San Diego
State or Province of Mailing Address:: CA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 92104

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: James
Middle Name:: C.
Family Name:: Hsia
Name Suffix::
City of Residence:: Weston
State or Province of Residence:: MA
Country of Residence:: US
Street of Mailing Address:: 41 Page Road
City of Mailing Address:: Weston
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 02493

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: US
 Status:: Full Capacity
 Given Name:: Kathleen
 Family Name:: McMillan
 Name Suffix::
 City of Residence:: Concord
 State or Province of Residence:: MA
 Country of Residence:: US
 Street of Mailing Address:: 1958 Main Street
 City of Mailing Address:: Concord
 State or Province of Mailing Address:: MA
 Country of Mailing Address:: US
 Postal or Zip Code of Mailing Address:: 01742

Correspondence Information

Correspondence Customer Number:: 021323

Representative Information

Representative Customer Number:: 021323

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|-------------------|----------------------|----------------------|
| This application | Continuation of | 09/587,156 | 06/05/00 |
| 09/587,156 | Continuation of | 09/153,052 | 09/15/98 |
| 09/153,052 | Continuation of | 08/794,876 | 02/05/97 |

Assignee Information

Assignee Name::
 City of Mailing Address::
 State or Province of Mailing Address::
 Country of Mailing Address::